

DEC 08 2004

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on the below date:

Date: 8 DEC 2004 Name: Timothy J. Le Duc Reg. No. 54,745 Signature: Timothy J. Le Duc

BRINKS
HOFFER
GILSON
& LIONE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appln. of: Christopher G. Dixon et al.

Appln. No.: 09/875,532

Filed: June 6, 2001

For: High Pressure Injection Syringe

Attorney Docket No: 8627/488

Examiner: LoAn H. Thanh

Art Unit: 3763

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

Sir:

Attached is/are:

☒ Supplemental Amendment and Response; Petition and Fee for Extension of Time; and Check for \$430

☒ Return Receipt Postcard

Fee calculation:

☐ No additional fee is required.

☐ Small Entity.

☒ An extension fee in an amount of \$430 for a 2-month extension of time under 37 C.F.R. § 1.136(a).

☐ A petition or processing fee in an amount of \$_____ under 37 C.F.R. § 1.17(_____).

☐ An additional filing fee has been calculated as shown below:

					Small Entity			Not a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus			x \$9=			x \$18=	
Indep.		Minus			x 44=			x \$88=	
First Presentation of Multiple Dep. Claim					+\$150=			+\$300=	
					Total	\$		Total	\$

Fee payment:

☒ A check in the amount of \$430 is enclosed.

☐ Please charge Deposit Account No. 23-1925 in the amount of \$_____. A copy of this Transmittal is enclosed for this purpose.

☐ Payment by credit card in the amount of \$_____ (Form PTO-2038 is attached).

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

8 DEC 2004

Date

Respectfully submitted,

Timothy J. Le Duc
Timothy J. Le Duc (Reg. No. 54,745)

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CENTRAL FAX CENTER

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313
on

Date of Deposit

Timothy J. Lo Duc -- Reg. No. 54,745

Name of applicant, assignee or
Registered Representative



Signature
8 DEC 2004
Date of Signature

Case No. 8627/488

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Christopher G. Dixon et al.

Serial No: 09/875,532

Examiner: LoAn H. Thanh

Filed: June 6, 2001

Group Art Unit: 3763

For: HIGH PRESSURE INJECTION
SYRINGE

PETITION AND FEE FOR EXTENSION OF TIME (37 CFR § 1.136(a))

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is a petition for an extension of the time to respond to an Advisory Action dated October 15, 2004 for a period of 2 month(s).



Applicant:



claims small entity status. See 37 C.F.R. §1.27.

Case No. 8627/488☒ is other than small entity

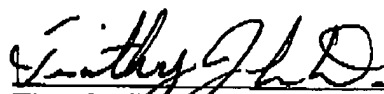
	<u>Extension Months</u>	<u>Other Than Small Entity</u>	<u>Small Entity</u>
<input type="checkbox"/>	One Month	\$110.00	\$55.00
<input checked="" type="checkbox"/>	Two Months	\$430.00	\$215.00
<input type="checkbox"/>	Three Months	\$980.00	\$490.00
<input type="checkbox"/>	Four Months	\$1,530.00	\$765.00
<input type="checkbox"/>	Five Months	\$2,080.00	\$1,040.00

Fee Payment

- ☒ Attached is a check for \$430 for the Petition fee.
- ☐ Attached is a credit card authorization form for \$_____ for the Petition fee.
- ☐ Charge Petition fee to Deposit Account No. 23-1925. A duplicate copy of this Petition is attached.
- ☒ Charge any additional fee required or credit for any excess fee paid to Deposit Account No. 23-1925. A duplicate copy of this Petition is attached.

Respectfully submitted,

Dated: 8 DEC 2004


Timothy J. Duc
Registration No. 54,745
Attorney for Applicant

BRINKS HOFER GILSON & LIONE
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CHICAGO, IL 60610
(312)321-4200